

KENNY C. GUINN
Governor

SYDNEY H. WICKLIFFE, C.P.A.
Director

STATE OF NEVADA
DIVISION OF MORTGAGE LENDING
DEPARTMENT OF BUSINESS AND INDUSTRY
400 W KING STREET, SUITE 406
Carson City, Nevada 89703
(775) 684-7060 Fax (775) 684-7061

SCOTT E. BICE
Commissioner

Web address: mld.nv.gov

RENEWAL APPLICATION OF MORTGAGE AGENT CERTIFICATE

FROM: Mortgage Agent's name: _____
Mortgage Agent's SS#: _____

TO: Scott E. Bice, Commissioner

Application is hereby made for renewal of Mortgage Agent Certificate, expiring _____
(Check date at mld.nv.gov under licensee records)

Enclosed are the following items required for the renewal:

1. **Renewal Fee (REFER TO ATTACHED FEE SCHEDULE).**

2. To verify that our records are correct please provide in the space below the name of the Company, and the ***NEVADA OFFICE*** address and telephone number where you are employed.

Company Name: _____

Nevada Office Address: _____

City/State/Zip: _____

Nevada Office Telephone Number: _____

Mortgage Agents Birth date: _____

3. Attached is a **copy** of my Continuing Education Certificate verifying 5 hours of continuing education.
_____ **Yes**

By: _____
(Signature of Mortgage Broker **Agent**)

By: _____
(Signature of Mortgage Broker or Qualified Manager)